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Center for Medicaid and State Operations

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SUBJ: HCBS Quality Communication # 9

DATE: June 13, 2005

Quality Communication #9 represents another in a series of CMS communications to support state efforts to improve the quality of services and supports provided through the Medicaid Home and Community-based Waiver (HCBS) program to older persons and people with disabilities.

This communication announces the availability of four technical assistance products:

- Home and Community Based Services: Quality Management Roles and Responsibilities
- Discovery Methods for Remediation and Quality Improvement in Home and Community Based Services
- Software for the Participant Experience Survey (PES and Users' Guide) MR/DD Version
- Participant Experience Survey and Users' Guide Brain Injury version

Home and Community Based Services: Quality Management Roles and Responsibilities and Discovery Methods for Remediation and Quality Improvement in Home and Community Based Services are the first two of three papers synthesizing the ideas and practices of states as they improve the quality of Home and Community Based Services for

older persons and people with disabilities. The documents were developed by the Muskie School of Public Service, University of Southern Maine as part of its work with the Community Living Exchange, a project funded by CMS to support the 2003 Real Choice Systems Change grantees. The papers are intended to share States' thinking about these issues, to highlight various approaches that States are using, and to promote the exchange of information among States.

Quality Management Roles and Responsibilities and Discovery Methods addresses the questions:

- 1. How is quality defined for HCBS?
- 2. What is meant by quality management?
- 3. How do States develop quality management expertise?
- 4. How do States organize their quality management strategies?

Discovery Methods for Remediation and Quality Improvement addresses the questions:

- 1. Why are discovery methods important?
- 2. What are the outcomes that discovery methods seek to assess?
- 3. What is a discovery method?
- 4. What are the features of a reliable and robust system of discovery methods?
- 5. What is a comprehensive yet focused system of discovery methods?
- 6. What evidence or other reports are produced from discovery methods?
- 7. How do States move from discovery to action?

The papers are available at:

- http://hcbs.org/moreInfo.php/nb/doc/1132/Home_and_Community-Based_Services: Quality_Managem;
- http://hcbs.org/moreInfo.php/nb/doc/1253/Discovery_Methods_for_R emediation_and_Quality_Impr;
- http://www.cms.hhs.gov/medicaid/waivers/quality.asp.

A limited number of copies are available in hard copy upon request from the Muskie School of Public Service (send requests to hskillin@usm.maine.edu).

Two New PES Tools

The *Participant Experience Survey (PES) - Elderly/Disabled Version* and *MRDD Version* were both originally released on October, 2003. Software for the *Elderly/Disabled Version* was released in May, 2004. This communication announces the availability of the software for the MR/DD version, as well as the release of the PES Brain Injury version.

The *PES* is a series of population-specific interview tools that capture data that can be used to calculate indicators for monitoring quality within waiver programs. The *PES* tools were designed to be part of a State's broader quality management strategy and are provided for your voluntary

use. The Users' Guides provide guidance on survey administration and calculation of quality indicators. Each survey version is designed to be conducted as a face-to-face interview, lasting approximately thirty (30) minutes or less. All of the PES surveys were developed by The MEDSTAT Group, Inc. (Medstat), under contract with CMS. For more information on the development of the PES tools, and copies of the instruments and users' guides, see http://www.cms.hhs.gov/medicaid/waivers/consexpsurvey.asp.

- 1. *PES MRDD Software* automates data collection and analysis for the PES MRDD tool released in 2003. Some of the advantages of the PES MRDD software are:
 - <u>Ease of installation</u>. All information for installing the software is contained on the software CD. No additional licensed software is required.
 - <u>Ease of Use.</u> The survey template on the screen resembles the hard copy version of the PES MRDD. Entering responses involves a simple click on the appropriate answer. All responses are automatically collated, from multiple laptops, into a single master database for analysis.
 - <u>Flexibility</u> The software design also allows States to add additional questions at the
 end of the survey, and to make some language substitutions where appropriate.
 However, States may not change or delete the original questions from the PES
 MRDD.
 - Analysis of the survey responses. Analysis of the survey responses provides
 information about waiver participants' experiences with the waiver supports and
 services along four dimensions: choice/control, respect/dignity, access to care, and
 community integration/inclusion. The software automatically calculates a total of 51
 quality indicators. Additional options include a menu-driven system for creating
 additional reports, the ability to stratify results by user-defined demographic
 variables, and the ability to export data into other software packages for statistical
 analyses.

More information on the PES MRDD software, including information on obtaining copies of the software CD, a user ID and a pass code, can be found at http://www.cms.hhs.gov/medicaid/waivers/quality.asp. In addition, copies of the software will be mailed separately to State Medicaid Directors and State Directors of Developmental Disability Services. Technical assistance with installation and use of the PES MRDD software is available through Medstat, CMS's National Quality Contractor. More information about how to access that technical assistance is located on our website at http://www.cms.hhs.gov/medicaid/waivers/techasst.asp

2. *Participant Experience Survey, Brain Injury version (PES BI)* combines elements of the original PES E/D and MRDD survey tools, with modifications to reflect the unique attributes and service needs of the waiver population with brain injuries. It was developed

with assistance from brain injury waiver staff in several states, members of local and national advocacy groups, consumers, and academic and provider experts, and tested with waiver participants in four states. The target population for this instrument is adults with acquired brain injuries, which include both traumatic brain injuries and brain injuries from other sources, such as strokes and tumors.

The tool comprises four domains: program supports; choice and control; respect and dignity; and community activities. Two additional sets of questions, covering community integration in greater depth and ADL/IADL unmet needs, are included for waiver programs where they are applicable. Data from the PES BI can be used to calculate up to 58 performance indicators in the domains listed above. The Users' Guide provides detailed information on administering the PES BI, including guidance on sampling, interviewer selection and data analysis, as well as training materials for interviewers.

Copies of the PES BI instrument and Users' Guide may be found at. http://www.cms.hhs.gov/medicaid/waivers/consexpsurvey.asp

All of the former Quality Letters and the HCBS Quality Tools are available on the CMS website at. http://www.cms.hhs.gov/medicaid/waivers/qcomm.asp. As always, we invite your feedback about these tools and about all of our quality communications, which you can send to us via e-mail at hcbsquality@cms.hhs.gov.